



# LOS ANGELES COUNTY COMMISSION ON HIV

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*While not required of meeting participants, signing-in constitutes public notice of attendance. Presence at meetings is recorded solely based on sign-in sheets, and not signing-in constitutes absence for Commission members. Only members of the Commission on HIV are accorded voting privileges, thus Commissioners who have not signed in cannot vote. Sign-in sheets are available upon request.*

## COMMISSION ON HIV MEETING MINUTES April 8, 2010

**Approved**  
**5/13/2010**

MEMBERS PRESENT	MEMBERS PRESENT, CONT.	PUBLIC, CONT.	OAPP/HIV EPI STAFF
Carla Bailey, <i>Co-Chair</i>	Tonya Washington-Hendricks	Geneviève Clavreul	Chi-Wai Au
Anthony Braswell, <i>Co-Chair</i>	Fariba Younai	Blanca Corea	Kyle Baker
Sergio Aviña		Miguel Fernandez	Carlos Vega-Matos
Al Ballesteros		Aaron Fox	Amy Wohl
Fredy Ceja	<b>MEMBERS ABSENT</b>	Shawn Griffin	Juhua Wu
Nettie DeAugustine	Carrie Broadus	Miki Jackson	Dave Young
Whitney Engeran-Cordova	Robert Butler	Thelma James	
Douglas Frye	James Chud	Edmundo Lopez	
Jeffrey Goodman	Eric Daar	Meyer Miller	<b>COMMISSION</b>
Michael Johnson	David Giugni	Joanne Oliver	<b>STAFF/CONSULTANTS</b>
Lee Kochems	Anna Long	Ric Parish	Julie Cross
Bradley Land	Quentin O'Brien	Julion Sanchez	Dawn McClendon
Ted Liso	Ron Osorio	Jeff Smith	Jane Nachazel
Jenny O'Malley	Stephen Simon	Judy Tevero	Glenda Pinney
Dean Page/Terry Goddard	Kathy Watt	Craig Thompson	James Stewart
Angélica Palmeros		Brigitte Tweddell	Craig Vincent-Jones
Mario Pérez		Silvia Valerio	Nicole Werner
Karen Peterson	<b>PUBLIC</b>	Sharon White	
Juan Rivera	H. Avilez	Jason Wise	
Jennifer Sayles	Robert Boller		
Robert Sotomayor	Donna Brown		

- CALL TO ORDER:** Mr. Braswell called the meeting to order at 9:20 am.
  - Roll Call (Present):** Aviña, Bailey, Ballesteros, Braswell, Ceja, DeAugustine, Engeran-Cordova, Frye, Goodman, Johnson, Kochems, Liso, O'Malley, Page/Goddard, Palmeros, Pérez, Peterson, Rivera, Sayles, Sotomayor, Washington-Hendricks
- APPROVAL OF AGENDA:**

**MOTION 1:** Approve the Agenda Order (*Passed by Consensus*).
- APPROVAL OF MEETING MINUTES:**

**MOTION 2:** Approve the minutes from the March 11, 2010 Commission on HIV meeting (*Passed by Consensus*).
- CONSENT CALENDAR:**

**MOTION 3:** Approve the Consent Calendar with Motions 4 and 5 pulled for later consideration (*Passed by Consensus*).
- PARLIAMENTARY TRAINING:** There was no report.

**6. PUBLIC COMMENT, NON-AGENDIZED:**

- Ms. Tweddell noted Project New Hope is a permanent housing, transitional and support services provider with about 40% undocumented clients. Shelter plus care has proven essential in successful moves from transitional to permanent housing.
- Approximately six weeks ago housing providers were called to a meeting of Homeless Authority of the City of Los Angeles (HACLA) meeting at which they were informed that HUD has directed HACLA to end subsidies for undocumented clients as of 7/1/2010.
- About 221 of their clients with families will be affected during the year as they apply for recertification. They have a wait list for shelter plus care of about 150, mostly undocumented, which will be purged. Alternate services have not been found.
- Mr. Vincent-Jones noted Mr. Vega-Matos, OAPP, is working on the issue and the issue has already been forwarded to the P&P Committee.

**7. COMMISSION COMMENT, NON-AGENDIZED:**

- Mr. Johnson complemented Mr. Ballesteros, Chief Executive Officer, and JWCH Institute on their partnership with DHS in a new SSDI demonstration project. Outreach workers evaluate homeless individuals. The program files for SSDI and provides medical, medication and support services. Fifteen people have been approved with 200 more in the process.
- Mr. Ballesteros added providers can use the program to fast-track SSDI eligibility. Anyone in the County can be helped.

**8. PUBLIC/COMMISSION COMMENT FOLLOW-UP:**

**A. LA County Concerns about State's HIV Surveillance Response:**

- Mr. Pérez discussed the work group's draft letter on the Legislative Analyst's Office HIV surveillance report and OA's response with Dr. Jonathan Fielding, Director, DPH. The letter is a joint Commission/DPH message asking measurable outcomes from Mark Horton, Director, California DPH. There will be a follow-up call with Drs. Fielding and Horton.
- Ms. DeAugustine, President, California Conference of Local AIDS Directors, reported significant concerns statewide about surveillance and the affect on federal funding due to under-reporting of HIV cases.
- Dr. Frye said a current bill has two parts: require Department of Corrections to report findings of any disease including HIV to the jurisdiction of origin and electronic laboratory reporting to replace paper or phone reports to counties. It lacks reporting cases and case information which are needed for surveillance data, but it is hoped that will be added.
- The CDC is working with a group to develop HIV and AIDS mapping by state and other groups are working on GIS as well. Dr. Frye said he rejected one request for data down to the zip code level as a HIPAA issue at this time.
- Mr. Pérez noted about 33 states have mature reporting systems and contribute to GIS efforts. He expressed concern that California's system was not mature, so reporting incomplete data could send an inaccurate message. Dr. Frye agreed.

**9. STANDING COMMITTEE REPORTS:**

**A. Joint Public Policy (JPP) Committee:**

**1. *Proposed State 2010 Legislative Docket:***

- Mr. Engeran-Cordova noted JPP annually reviews HIV-related/-pertinent legislation following the last day for introduction of bills in the California Legislature. Bills are reviewed for relevance, positions identified and priorities determined for Commission and Prevention Planning Committee (PPC) recommendation.
- Possible positions are: support, oppose, watch, postpone (for additional information), no action. Any position might be modified, e.g., support if amended in some way. An on-going docket updates JPP on bill status during the year.
- Mr. Kochems added some bills are designated as high priority (asterisked) to focus limited County advocacy efforts.
- All JPP recommendations were arrived at by consensus. The PPC approved positions 4/1/2010 and will forward them to OAPP. Commission recommendations are forwarded to CEO/IGR, DPH and Board of Supervisors as appropriate.
- AB 562 is opposed as claim information released to employers could negatively impact employment.
- AB 1262 waives sales tax for charitable organizations which establish a supporting for-profit enterprise like a thrift shop. Large charities like Goodwill are now exempt putting smaller charities at a disadvantage. The bill position is watch as it reduces the General Fund by an unknown amount in addressing the disparity.
- AB 2590 is sponsored by AHF to allow state-contracted agencies better identification of potential clients to help locate them, e.g., for disease management. JPP took a watch position as the bill is being revised. Mr. Johnson felt the level of data requested is excessive and, as contract does not imply agency, release of such data threatens privacy.
- AB 2645 is designated watch while JPP requests more information from DMH.
- SB 810 for California universal health care has been introduced and supported by the Commission before. The high priority position shows support to expand accessibility. Mr. Pérez noted estimates that federal reform will cover 1 of 2 million County uninsured. Amendments to integrate with federal reform are anticipated if the bill moves forward.

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- Mr. Ballesteros notes states have the right under federal reform to move up to April 2010 from 2014 implementation of Medicaid coverage below 133% of the Federal Poverty Level. He advocated the Legislature address that.
- Mr. Land recommended an amendment to the bill to allow counties to develop their own systems using federal, state and local resources. A similar system is effective in Hawaii.
- SB 1069 was prioritized high because increasing Physician Assistant (PA) authority can leverage health care resources. PAs would be able to, for example, sign off on physicals, assign disability status and order durable equipment. It also changes how PA licenses can be challenged. Reimbursement rates are not addressed.
- SB 1169 is rated high because it removes barriers from equal medical and mental health access under private insurance. California has a parity law which requires equal benefits if mental health is offered. This bill requires a request tracking number and clarifies current parity language especially regarding utilization reviews.
- Bills are posted on the Commission's website at [www.hivcommission-la.info](http://www.hivcommission-la.info).
- JPP recommendations are as follows:

Priority*	State Legislation	Author(s)	Subject Matter/Topic(s)	Recommended Position
	▪ AB 52	Portantino	Umbilical Cord Blood Collection Program	<u>Support</u> : Enhances availability of stem cells for transplantation and research.
	▪ AB 562	Cook	Health care coverage: report of claim information	<u>Oppose</u> : Allows employers with 50 or more employees to request aggregate insurance claim cost and coded cost/service data when \$15,000+ claims in last 12 months.
	▪ AB 664	Skinner	Workers compensation: hospital employees: presumption	<u>Support</u> : Expands hospital employee Workers' Comp to blood borne infections, neck or back impairment or MRSA.
	▪ AB 1044	Jones	Continuing care retirement communities	<u>No action</u> : Defer for discussion on relevance to housing for aging PWH.
	▪ AB 1076	Jones	Medi-Cal	<u>Postpone</u> : Review new language.
	▪ AB 1262	Audra Strickland	Sales and use taxes: exemptions: charitable organizations	<u>Watch</u> : Reduces taxes collected unknown amount. Large charities like Goodwill already exempt. County opposes tax cuts.
★	▪ AB 1694	Beall	Alcohol-Related Services Program	<u>Support</u> : Increases alcohol seller fees to fund alcohol abuse programs including to PWHIV
	AB 1701	Chesbro	Hypodermic needles and syringes	<u>Support if amended to reflect SB 1029</u>
★	▪ AB 1858	Blumenfield /Monning	Blood borne disease prevention: sterile syringes and needles	<u>Support</u> : Lifts 2010 sunset; expands furnished/possessed syringes from 10 to 30. Companion to SB 1029.
★	▪ AB 1864	Audra Strickland/ Galgiani	Medi-Cal: HIV drug treatment: developmental services: provider reimbursement	<u>Support</u> : Ensures HIV drug treatment and developmental services provider reimbursement if budget not passed or deficiency in Medi-Cal budget.
★	▪ AB 1868	Jones	Disability reform: insurance	<u>Support</u> : Prohibits discretionary clauses that limit eligibility or interpret policy terms.
★	▪ AB 1966	Fletcher	Medi-Cal: federally qualified health centers (FQHC) and rural health clinics (RHC): obstetrics	<u>Support</u> : Allows Medi-Cal fee-for-service reimbursement to FQHCs and RHCs for inpatient obstetrical services.
★	▪ AB 2110	De La Torre	Disability insurance: premiums: grace periods	<u>Support</u> : Extends non-weekly premium minimum grace period to 50 days.
	▪ AB 2590	Bonnie Lowenthal	AIDS healthcare: AIDS testing: disclosure of results	<u>Watch</u> : Designed to increase opt-in State contracted disease management by opening contractor access to HIV test results. Agencies sending questions to Medi-Cal.
	▪ AB 2645	Chesbro	Mental health: skilled nursing facilities (SNF):	<u>Watch</u> : Freezes SNF rate at 7/1/2009 consistent with nursing homes. Ask DMH

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				reimbursement rate	for recommendations.
	▪	AB 2762	Comm. on Housing/Community Develop.	Housing and community development: housing omnibus bill	<u>Watch</u> : Potential for expanding affordable housing. Get more information.
	▪	AJR 13	Ammiano	Joint resolution: blood donation(s)	<u>Support</u> : Requests President encourage HHS to remove blood donation restrictions on gay, bisexual, transgender and heterosexual men.
	▪	AJR 17	Swanson	Joint resolution: HIV/AIDS health disparities	<u>Support</u> : Urges President and HHS to take specific actions to reduce HIV/AIDS health disparities.
★	▪	SB 227	Alquist	Health care coverage: MRMIP (Major Risk)	<u>Support</u> : Increases funding, coverage and availability of MRMIP. Consistent with 2009 JPP position.
★	▪	SB 810	Leno	The California Universal Health Care Act	<u>Support</u> : Single-payer, universal care plan. Has been passed and vetoed for three years.
★	▪	SB 1029	Yee	HIV and Hepatitis prevention: sterile syringes	<u>Support</u> : Lifts 2010 sunset; expands furnished/possessed syringes from 10 to 30. Companion to AB 1858.
★	▪	SB 1069	Pavley/Fletcher	Additional medical authority for Physician Assistants (PAs)	<u>Support</u> : Allows PAs to do more routine medical duties under physician supervision.
★	▪	SB 1169	Alan Lowenthal	Health care coverage: mental health care claims: prior authorization: mental health	<u>Support</u> : Supports access by tracking claims and requiring physical and mental health treatment standard parity. Similar to vetoed AB 244 supported by JPP.
★	▪	SJR 14	Mark Leno	Joint resolution: use of marijuana for medical purposes	<u>Support</u> : Urges end to federal raids and creation of medical marijuana policy. Consistent with past JPP position.

➡ Refer varying bill viewpoints to JPP and SB 810 amendment suggestions to JPP Health Care Reform Work Group.

**MOTION 4:** Approve the proposed State legislative positions and priorities on the FY 2010 legislative docket with the exception of SB 810, as presented, and forward recommendations to the CEO/IGR, DPH and Board of Supervisors as appropriate (*Passed by Consensus*).

**MOTION 4A (Page/no second required):** Approve the proposed SB 810 position and priority on the FY 2010 legislative docket, as presented, and forward recommendation to the CEO/IGR, DPH and Board of Supervisors as appropriate (*Passed: 19 Ayes; 2 Opposed; 0 Abstention*).

## 2. Federal Health Care Reform:

- Ms. Cross, Consultant, presented on the Patient Protection and Affordable Care Act signed into law by President Obama on 3/23/2010 with its companion Health Care and Education Reconciliation Act signed into law 3/30/2010.
- There will be major changes to individual health insurance, Medicaid (Medi-Cal) and Medicare. It mandates insurance for all U.S. citizens and legal residents, but not undocumented immigrants who are also excluded from all but Medicaid “emergency” programs. It will roll out over 10 years with the most significant changes in 2014.
- Key issues for PWH addressed are prohibition of denials due to pre-existing conditions in the private insurance system and coverage based on having a disability in the public health system as in Medicaid (Medi-Cal) and Medicare.
- Uninsured coverage is increased by expanding Medicaid to those with incomes under 133% Federal Poverty (FPL) of \$14,404 (individual) and an insurance exchange for small group employers and those with incomes above 133% FPL. A subsidy is available for those with FPL of 133% to 400%. Full federal expansion support is temporary.
- There are about 48 million uninsured, including about 29% of PLWH/A. It is hoped about 32 million will be covered by the public and private insurance reforms which will reduce the number of those reliant on Ryan White.
- Medicaid (Medi-Cal) expansion rolls out in 2014. It temporarily increases provider reimbursement rates. It does not include the Early Treatment for HIV Act (ETHA) for non-disability HIV coverage prior to 2014 or a new mandatory minimum benefits package. It continues the 5-year exclusion of legal immigrants. Full federal expansion support is temporary. The bill also prohibits states that intend to use the program from cutting eligibility during the interim.

- “The Exchange” for insurance is to create healthy market competition for better coverage and lower consumer cost. It establishes a minimum benefit package with no lifetime caps, but excludes vision and dental coverage. It also prohibits insurance denial based on pre-existing conditions or increased costs based on pre-existing conditions or gender. It establishes a temporary national high risk pool starting in 90 days to cover those with pre-existing conditions until the prohibition engages. It may be possible to use Ryan White to subsidize insurance premiums.
- There is no major expansion of Medicare eligibility, but program improvements will gradually eliminate the Part D “donut hole” coverage gap beginning with a \$250 rebate in 2010 and counting ADAP toward the gap starting in 2011. A new office will serve those eligible for both Medicare and Medicaid (Medi-Cal).
- There is wellness/prevention funding in the bill, but it is not yet known whether it can be used for HIV activities.
- There are many other questions yet to be resolved including the relationship of Ryan White to the reform bills.
- Ms. Cross emphasized continued advocacy on unresolved issues and community education. There was confusion when Part D changes were instituted despite three years warning. These changes are much more extensive.

3. **Community Mobilization Plan:**

- Mr. Engeran-Cordova reported the Executive Committee discussed AIDS Watch and similar out-of-state activities. Given their expense and questions of their effectiveness, it was decided to develop local advocacy efforts instead.
- JPP will coordinate training for and local Congressional representative visits during Congress recesses on June 1-5 and July 4-10. A memorandum was in the packet.

4. **State Budget 2010-2011:** Nothing new to report at this point.

5. **Medi-Cal 1115 Waiver:** Nothing new to report at this point.

6. **Adult Film Industry Reform:**

- Mr. Engeran-Cordova reported the Standards Board of Cal-OSHA held a meeting to consider forming a body to look at Cal-OSHA changes to better enforce protective barrier use in the Adult Film Industry.
- The hearing took place with many speakers, including County representatives speaking in favor. The Board voted unanimously to form a committee to address Cal-OSHA standards revisions.
- The County, itself, may also act independently. JPP will consider new JPP hearings at its next meeting.

B. **Standards of Care (SOC) Committee:**

1. **Evaluation of Service Effectiveness:**

- Dr. Younai noted an updated copy of the completed methodology was in the packet.
- Provider surveys are being distributed and OAPP is continuing to collect its data.
- It is anticipated that a presentation on findings will be available by July 2010.

2. **Medical Care Coordination (MCC) TA:** MCC work is on-going.

C. **Priorities & Planning (P&P) Committee:**

1. **FY 2011 P-and-A Setting Process:**

a. **Paradigms and Operating Values:**

- Mr. Goodman noted a memorandum in the packet explaining recommendations from P&P and SOC on the paradigms and operating values, which provide a lens through which to view P-and-A decisions and are guidance for how to run the process, respectively.
- Choices are consistent with prior years. Paradigms chosen are: compassion, equity and utilitarianism. Operating values chosen are: access, efficiency and quality.
- A new Program/Planning Brief was also in the packet to help educate the community about the P-and-A process. It includes a meeting schedule with proposed subjects to foster community participation.

**MOTION 5:** Approve the proposed paradigms and operating values for the FY 2011 priority- and allocation-setting process, as presented (*Passed by Consensus*).

D. **Operations Committee:**

1. **Member Nominations:**

- Mr. Johnson emphasized, with one-third new members, training and mentoring are a key Committee focus.
- Terms are set by the County for two years staggered with half ending each year. Those assuming a seat mid-way through a term must reapply when it ends. Commissioners whose terms end this June should re-apply by May to allow the Committee time to review applications. When renewals are not received, other applicants may fill seats.
- Renewals due include: Bailey, Ballesteros, Butler, Daar, Goodman, Giugni, Land, O’Malley, Peterson, Sayles, Simon, Watt. Mr. Vincent-Jones noted renewals mostly are an update of original information.

- Ms. DeAugustine complemented applicant quantity and quality. She encouraged those not selected to stay active and re-apply. Recommendations are often close and involve determining the best fit for a particular seat. Potential applicants can increase their Commission understanding by attending meetings and volunteering on committees.

**MOTION 6:** Nominate Thelma James to the SPA 6 Consumer, Abad Lopez to the SPA 2 Consumer and Anna Long to the DPH/Part A seats and forward to the Board of Supervisors for appointment (*Passed as part of the Consent Calendar*).

**11. CO-CHAIRS' REPORT:**

- Ms. Werner thanked those who submitted their Form 700 (Conflict of Interest). She has notified the Executive Office of those with outstanding forms. She has sent three reminders and Commission Co-Chairs will send one more.
- The Executive Office will pursue follow-up for those who do not file. Fines can be assessed up to \$100 per day.

**12. EXECUTIVE DIRECTOR'S REPORT:** There was no report.

**13. HIV EPIDEMIOLOGY PROGRAM REPORT:**

**A. Medical Monitoring Project (MMP):**

- Dr. Wohl, Chief Epidemiologist/Lead Investigator, presented on the Medical Monitoring Project (MMP), a CDC-funded supplemental surveillance project to develop locally and nationally representative data on people receiving HIV care.
- Goals are to provide estimates of behaviors and clinical outcomes, describe health-related behaviors, determine accessibility and use of prevention and support services, increase knowledge of care and treatment provided and examine variations by geographic area and patient characteristics.
- The study uses a one-time, 45-minute interview with a section for locally developed questions and a medical record abstraction component. 26 project areas were chosen to represent the U.S. and all HIV providers with stand-alone medical records systems identified. There were 222 providers in the County with 25 sampled that included large, medium and small providers. 400 patients comprised the sample of those accessing care between January and April of a given year.
- 2007 and 2008 MMP data has been analyzed. 333 interviews were done between 9/2007 and 6/2009 with 260 (78%) from Ryan White clinics. They were in Spanish for 28% of overall participants and 36% of Ryan White participants. A minimum set of demographic data was collected from HARS for nearly all those who could not be interviewed.
- Participants and non-participants were similar, but those in MMP were more likely to have AIDS and less likely to have insurance. MMP participants were less likely to be African-American, but that may be because they tend to access care late and HARS includes those not in care. Latinos also enter care late, but were somewhat over-represented in MMP.
- Ryan White participants were more likely to be Spanish-speaking, born outside the US, non-white, younger, with lower education and income and no insurance in the last 12 months, but residentially stable. Non-Ryan White participants were more likely to be male, white, homosexual, born in the U.S. and privately insured.
- Ryan White participants had a mean 9.4 years since HIV diagnosis with a mean age of 33. 59% had an AIDS diagnosis with a mean age of 36.9. 69% were diagnosed with AIDS 3 years or less after their HIV diagnosis. 41% of CD4 counts were >500 and 51% had an undetectable viral load.
- There were no differences in >200 CD4 counts, undetectable viral loads in the last 12 months, the proportion receiving PCP medication for treatment or prophylaxis or the proportion on ARVs, but non-Ryan White participants were more likely to receive MAC medications for treatment or prophylaxis.
- The top five needs reported by Ryan White participants are: dental services, 47%; HIV case management, 42%; mental health counseling, 32%; transportation, 29%; and social services, 24%. Top unmet needs reported are: shelter services, 40%; dental services, 31%, social services, 25%; homemaker services, 21%; and mental health counseling, 20%.
- Factors associated with needing services were related to underserved populations like minority status, non-English language and lower education. Unmet needs for this group were associated with language and sexual orientation.
- Most Ryan White participants were able to get their needs met. Those less likely to do so overall were those interviewed in English and those self-identifying as homosexual or bisexual.
- ➡ 59% of Ryan White participants did not receive PCP medications for treatment or prophylaxis and 88% did not receive MAC medications for treatment or prophylaxis. However, this data will be revised as it does not take into account that PCP medications are only recommended at <200 CD4 count and MAC medications at <50.
- ➡ Dr. Wohl accepted Commission suggestions to develop a local study section with questions on oral health and exploring the Spanish-speaking population. She will also develop more data on the time gap between HIV and AIDS diagnosis, a comparison between national and local data and join with OAPP to identify funding streams other than Ryan White.



**14. OFFICE OF AIDS PROGRAMS AND POLICY (OAPP) REPORT:**

- Mr. Pérez reported OAPP has restructured in large part due to staff reductions. Mr. Vega-Matos has been appointed Chief of the newly integrated Care Services Division for clinical and clinical enhancement services. Mary Orticke has assumed oversight of Quality Management activities. He will provide a fuller presentation in May.
- He reported the Medical Outpatient RFP for SPAs 2 through 8 was re-released with several notable adjustments including extending the application deadline. The SPA 1 awards should be released by the end of the week.
- Issues raised at “Meet the Grantee” meetings included those on system responsiveness and those pertaining to agencies and particular staff. They have been combined with issues submitted through other means for a comprehensive Quality Management review overseen by Dr. Sayles. Some issues are serious and require significant inquiry.
- He will coordinate with Commission staff on a timeline as well as appropriate ways to report on system-wide grievances which are the purview of the Commission and issues of a confidential nature, e.g., regarding personnel. He added the Grievance Line was initiated since the start of “Meet the Grantee” meetings, so overall issue communication has improved.
- Dr. Sayles co-chaired a meeting of Public Health programs like OAPP and STD Programs with the Sheriff to review the entire incarceration and post-incarceration HIV investment as well as disease control efforts like diagnosing and screening various morbidities. The meeting was designed to elicit suggestions from those directly involved with care and attendance was large. Future meetings will be more focused. Results will be reported out to the community as benchmarks are reached.
- Sheriff leadership accepted suggestions to streamline rules and procedures which are now being implemented. Other areas targeted for work include implementing CaseWatch to improve communication and continuity of care including medication.

**A. FY 2010 Ryan White Part A Award:**

- Mr. Pérez reported the YR 20 Ryan White grant award reflects about a 2.4% increase of \$937,000 over YR 19. All complimented OAPP for their work. P&P will address planning for the additional funds at their next meeting.
- Mr. Engeran-Cordova reported California also received an increase in the Part B award of about \$6 million.

**15. STATE OFFICE OF AIDS (OA) REPORT:**

- Mr. Vincent-Jones has emphasized the importance of the office’s representation, but it has been reported that Michelle Roland, Director, has eliminated in-person representation. Clarissa Poole-Sims appears to be the representative choice, but her application has not yet been received.
- Mr. Pérez added he and Dr. Sayles have also advocated for regular representation as well as occasional attendance by the new Care Branch Chief because of the need for formal communication between the State and County stakeholders. There has not been an interest in doing either. Mr. Vincent-Jones noted historically the Care Branch Chief was the representative, and attendance has been spotty even when good people were filling the seat.
- Mr. Vincent-Jones does not believe funding is an issue. If teleconferencing is used to reduce expense, County Counsel has determined the Brown Act requires full posting and public access for all sites.
- ➡ Mr. Vincent-Jones will research history of the rule from several years ago previous committing OA to appoint representatives to participate in all planning councils. Dr. Roland’s directive appears to be in conflict with that commitment.

**MOTION 7 (Engeran-Cordova/Land):** Direct Executive Director to create a letter strongly urging the Director of the State Office of AIDS to send a representative regularly to the Commission on HIV meeting with copies to the Governor’s Office and the Secretary of Health and Human Services (*Passed by Consensus*).

**16. PREVENTION PLANNING COMMITTEE (PPC) REPORT:** The next Integration meeting will be 4/12/2010. The agenda includes discussion of the local AIDS Watch effort.

**17. BENEFITS REPORT:** There was no additional report.

**18. CONSUMER CAUCUS REPORT:** Mr. Land reported this month’s meeting was postponed due to the Special Executive Committee meeting after the Commission. Consumer Caucus meetings will resume after the May Commission meeting.

**19. PUBLIC HEALTH/HEALTH CARE AGENCY REPORTS:** There were no reports.

**20. TASK FORCE REPORTS:** Mr. Aviña reported the next monthly Latino Task Force meeting will be 4/16/2010. It develops recommendations for the Commission and PPC on prevention and care services to the Latino population. Commissioner involvement is encouraged.

**21. SPA/DISTRICT REPORTS:** Ms. White reported SPA 6 has expanded its priorities to include the top five health disparities including reproductive health, encompassing HIV and STDs. A white paper problem statement is planned by the end of the year. The next meeting will be 4/13/2010 at 10:00 am. The address will be available from Ms. McClendon at the Commission offices.

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**22. COMMISSION COMMENT:** Mr. Land said he was reminded of the devastating effect of HIV stigma last week when a 19-year-old African-American young woman died. She refused to take medication despite family and faith-based support. He encouraged more teen support like a summit to let them know they are not alone.

**23. ANNOUNCEMENTS:** There were no announcements.

**24. ADJOURNMENT:** Mr. Braswell adjourned the meeting to the Special Executive Committee meeting at 1:10 pm.

**A. Roll Call (Present):** Aviña, Bailey, Ballesteros, Braswell, Ceja, DeAugustine, Engeran-Cordova, Goodman, Johnson, Kochems, Land, Liso, O'Malley, Page/Goddard, Palmeros, Pérez, Peterson, Rivera, Sayles, Sotomayor, Washington-Hendricks, Younai

MOTION AND VOTING SUMMARY		
<b>MOTION #1:</b> Approve the Agenda Order.	<i>Passed by Consensus</i>	<b>MOTION PASSED</b>
<b>MOTION #2:</b> Approve the minutes from the March 11, 2010 Commission on HIV meeting.	<i>Passed by Consensus</i>	<b>MOTION PASSED</b>
<b>MOTION #3:</b> Approve the Consent Calendar with Motions 4 and 5 pulled for later consideration.	<i>Passed by Consensus</i>	<b>MOTION PASSED</b>
<b>MOTION #4:</b> Approve the proposed State legislative positions and priorities on the FY 2010 legislative docket with the exception of SB 810, as presented, and forward recommendations to the CEO/IGR, DPH and Board of Supervisors as appropriate.	<i>Passed by Consensus</i>	<b>MOTION PASSED</b>
<b>MOTION #4A (Page/no second required):</b> Approve the proposed SB 810 position and priority on the FY 2010 legislative docket, as presented, and forward recommendation to the CEO/IGR, DPH and Board of Supervisors as appropriate.	<i>Ayes:</i> Aviña, Bailey, Ballesteros, Braswell, Ceja, DeAugustine, Engeran-Cordova, Goodman, Johnson, Kochems, Land, O'Malley, Palmeros, Peterson, Rivera, Sayles, Sotomayor, Washington-Hendricks, Younai <i>Opposed:</i> Liso, Page <i>Abstention:</i> None	<b>MOTION PASSED</b> <b>Ayes:</b> 19 <b>Opposed:</b> 2 <b>Abstention:</b> 0
<b>MOTION #5:</b> Approve the proposed paradigms and operating values for the FY 2011 priority- and allocation-setting process, as presented.	<i>Passed as part of the Consent Calendar</i>	<b>MOTION PASSED</b>
<b>MOTION #6:</b> Nominate Thelma James to the SPA 6 Consumer, Abad Lopez to the SPA 2 Consumer and Anna Long to the DPH/Part A seats and forward to the Board of Supervisors for appointment.	<i>Passed by Consensus</i>	<b>MOTION PASSED</b>
<b>MOTION #7 (Engeran-Cordova/Land):</b> Direct Executive Director to create a letter strongly urging the Director of the State Office of AIDS to send a representative regularly to the Commission on HIV meeting with copies to the Governor's Office and the Secretary of Health and Human Services.	<i>Passed by Consensus</i>	<b>MOTION PASSED</b>